

NEW POSITION REQUISITION FORM MFASIS HR SYSTEM  
STATE OF MAINE BUREAU OF HUMAN RESOURCES

COMPANY NUMBER/NAME		POSITION NUMBER	
POS STATUS		CLASS TITLE	
POS TYPE	SHIFT		WEEKS/YEAR
JOB CLASS	CLASS/UNCLASS		LOCATION
SALARY TABLE	SALARY GRADE		POS HOURS
ADMIN UNIT	FUND SOURCE		WORKER COMP
AUTHOR DATE	POS BEGIN DATE		SEASON BEG MIH
POS CHG DATE	POS END DATE		FREEZE BEG DATE
ORG CODES	HOURS REDUCED		FREEZE END DATE
STD/NON-STD	LEG COUNT		FIN DISCL REQD
TEACHER CON DAY	FTE HOURS		RECRUIT STATUS
EXAM STATUS	FLSA STATUS		OPTION CODE
OT CODE			BHR AUTHOR DATE

*POSITION ACCOUNTING*

*BUDGET USE ONLY*

FUND	OBJECT	
AGENCY		
APPROP ORG	REPORT ORG	
APPROP UNIT	PROJECT	
ACTIVITY	GRANT	

*SIGNATURES*

AGENCY	BHR	BUDGET	<input type="checkbox"/> APPROVE
DATE	DATE	DATE	<input type="checkbox"/> DISAPPROVE